

# Road Traffic Accident Details Collection form



Date of the accident: \_\_\_\_\_ Time of the accident: \_\_\_\_\_

Location of the accident: \_\_\_\_\_

(Consider using What3Words for your exact location: <https://what3words.com/>)

## Other driver and vehicle details

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name of the Owner (if different from the driver): \_\_\_\_\_

Address of the Owner (if different from the driver): \_\_\_\_\_

Vehicle's Registration Number: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Insurance Policy Number: \_\_\_\_\_

Vehicle Make/Model and Colour: \_\_\_\_\_

Explanation of how the accident occurred:

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 0330 128 1407

 [www.autoclaimsassist.co.uk](http://www.autoclaimsassist.co.uk)

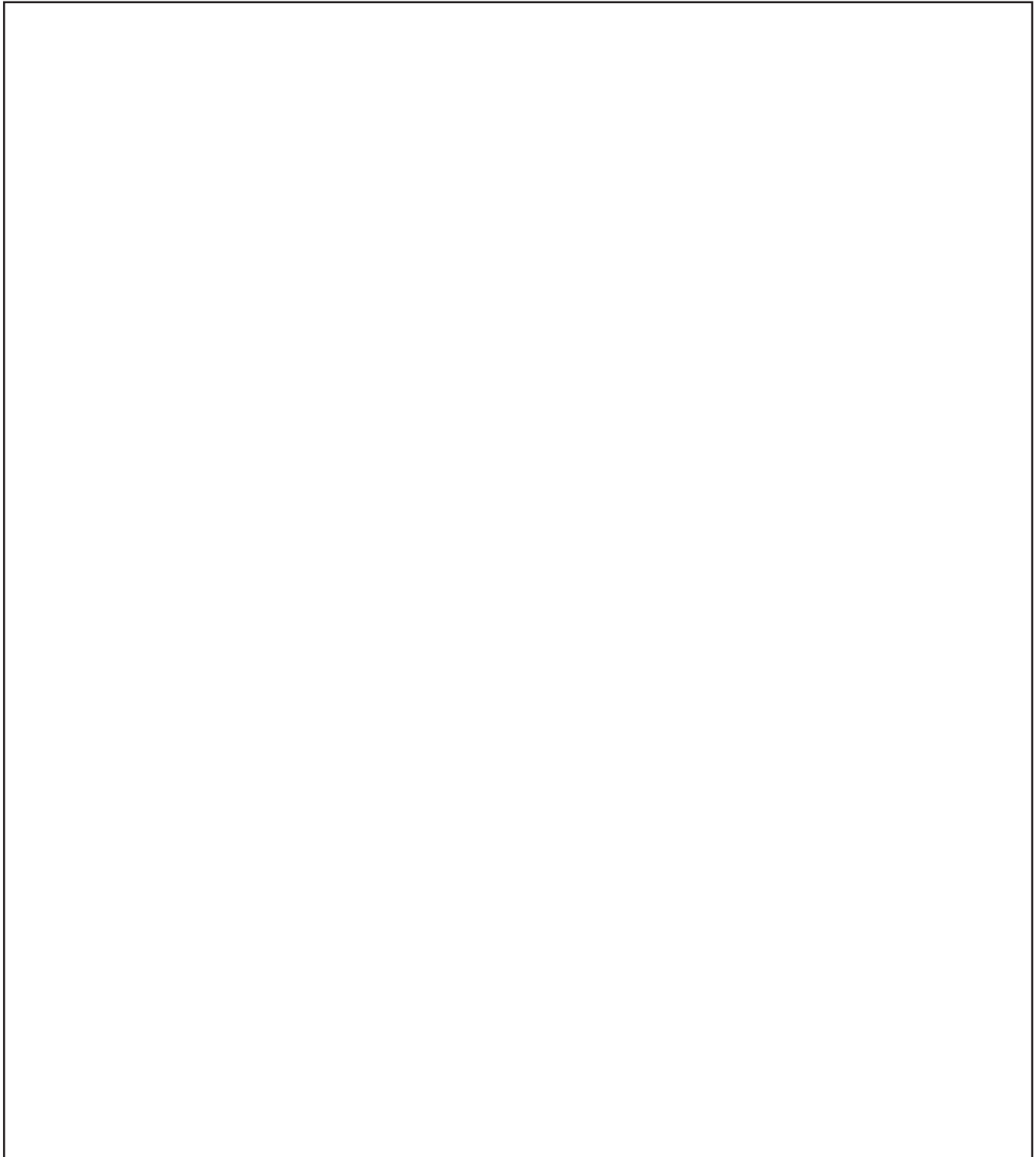
 Auto Claims Assist, Atkin St,  
Worsley, Manchester, M28 3DG

**Need Accident Recovery at the roadside?**  
Call Auto Claims Assist on 0330 128 1407.  
We provide roadside recovery at no cost to you.

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Continued...

### Sketch of how the accident happened:

Draw a diagram/sketch of how the accident happened. Once agreed to the sketch, ask the other driver to sign and date this document.



Your name: \_\_\_\_\_

Other driver's name: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

## Any other driver and vehicle details:

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name of the Owner (if different from the driver): \_\_\_\_\_

Address of the Owner (if different from the driver): \_\_\_\_\_

\_\_\_\_\_

Vehicle's Registration Number: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Insurance Policy Number: \_\_\_\_\_

Vehicle Make/Model and Colour: \_\_\_\_\_

## Witness Details:

Full name: \_\_\_\_\_

Address: \_\_\_\_\_

## Checklist of useful evidence to collect:

- |  |  |
|--|--|
| <input type="checkbox"/> Photos and Videos of scene, including positioning of vehicles involved, licence plates and damage occurred. | <input type="checkbox"/> Driver's statements                       |
| <input type="checkbox"/> Clear, wide-angle photos capturing the entire scene in different perspectives.                              | <input type="checkbox"/> Details of witnesses and their statements |
| <input type="checkbox"/> Notes or photos of any injuries   | <input type="checkbox"/> Any dash-cam or nearby CCTV footage       |
| <input type="checkbox"/> Notes of the weather and road condition or nearby traffic signals etc.                                      | <input type="checkbox"/> Police report (If involved)               |
|  | <input type="checkbox"/> Medical reports (if applicable)           |

If you've had a non-fault accident, contact Auto Claims Assist with this form to begin your non-fault claim. We handle everything for you, at no cost to you.

Call 0330 128 1407 or email [newclaims@autoclaimsassist.co.uk](mailto:newclaims@autoclaimsassist.co.uk)

[www.autoclaimsassist.co.uk](http://www.autoclaimsassist.co.uk)